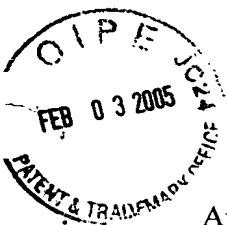


IFW

Attorney Docket No. 1883 B

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yoseph Yaacobi) Group Art Unit: 1615
Serial No.: 10/697,423) Examiner: NYA
Filed: October 30, 2003)
For: Ophthalmic Drug Delivery Device

Commissioner for Patents
Box 1450
Alexandria, VA 22313-1450

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I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date:

January 31, 2005

Date

Deena J. Nutt

Deena J. Nutt

Dear Sir:

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Pursuant to the duty of disclosure under 37 C.F.R. § 1.56, Applicant hereby submits this statement. This submittal is made in accordance with 37 C.F.R. §§ 1.97 and 1.98 and § 609 of the Manual of Patent Examining Procedure.

The Examiner is respectfully requested to fully consider each of the references cited on the attached form PTO/SB/08 and, after such consideration, initial the enclosed Form PTO/SB/08 in the space provided next to each reference. Please return a copy of the initialed Form PTO/SB/08 with the next communication transmitted to the Applicant. Any markings, underlines, notations or the like present in any reference are not to be construed as drawing the Examiner's attention to such marking or away from other portions of the reference.

This statement is filed before the mailing of a first office action on the merits pursuant to 37 C.F.R. § 1.97(b), and therefore no fee for the consideration of this statement is enclosed herewith. However, the Commissioner is hereby authorized to charge any amount required for the consideration of this statement to Deposit Account No. 501051 of Alcon, Inc.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "W. David Lee".

W. David Lee
Reg. No. 39,743

Alcon Research, Ltd.
Mail Code Q-148
Fort Worth, TX 76134-2099
Tel: (817) 568-6029
Fax: (817) 551-4610

Substitute for form 1449/PTO

FEB 03 2009

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet	1	of	1
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Complete if Known

Application Number	10/697,423
Filing Date	10/30/2003
First Named Inventor	Yaacobi
Art Unit	1615
Examiner Name	
Attorney Docket Number	1883B

U. S. PATENT DOCUMENTS

[illegible]

FOREIGN PATENT DOCUMENTS

[illegible]

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.